



GRANTEE: Native American Community Health Center, Inc.

PROGRAM TITLE: Native American Community Health Center, Inc.

Home Visiting Program

PROGRAM PERIOD: Cohort 1 (September 30, 2010 to September 29, 2015)

KEY GRANTEE PROGRAM STAFF

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GOAL OF THE PROGRAM

The goals of the Native American Community Health Center, Inc. (NACHCI) Home Visiting Program are to support the development of healthy, happy, and successful American Indian and Alaska Native (AI/AN) children and families. These goals will be achieved through a coordinated, high-quality, evidence-based home visiting strategy. The program will expand the evidence base around home visiting programs for AI/AN populations.

COMMUNITY CONTEXT FOR THE PROGRAM

State:	Arizona		
Rural or Urban/Reservation or Non-Reservation:	Urban Non-Reservation		
Description of Service Area:	The Native American Community Health Center, Inc. serves AI/AN populations residing in the Phoenix metropolitan area, including Maricopa County. AI/AN inhabitants make up approximately 2.2 percent (89,262) of the total population (4,023,132) living in Maricopa County.		
Births Per Year:	The Arizona birth rate per 1,000 population for the AI/AN population is 16.2 compared with 13.2 for all groups.		
Children Ages Birth to 5 Years in Target Community: The number of the AI/AN children ages birth to 5 living i Maricopa County is 7,661. The number of multiple races children ages birth to 5 living in Maricopa County of was as 11,473 in 2010 (individuals who report race as AI/AN combination with one or more other races).			
Unique Characteristics of Target Community:	Individuals from more than 30 tribes reside in the Phoenix metropolitan area, making it a diverse urban, tribal community. Twenty-four percent of the AI/AN population residing in Maricopa County live below the poverty level, compared to 13.4 percent of the overall population. The majority of American Indians living in the service area are Navajo.		

COMMUNITY CONTEXT FOR THE PROGRAM (continued)

Key Community Partners:	 Injury Prevention Center New Directions for Infant Brain Development Head Start First Things First NACHCI's WIC Clinic PIMC (primary hospital for the Phoenix area American Indian and Alaska Native population) 	 Phoenix Children's Hospital Arizona Department of Health Services Indian Health Service Bethany's Women Health Care Health Start 	
Primary Risk Factors in Target Community:	The primary risk factors include: • poor family health status • poor child health and development • child abuse and neglect • poor school readiness • and decreased family stability due to low income, poverty, crime, violence, and substance abuse.		

PROGRAM DELIVERY CONTEXT

Organization Type	Native American Community Health Center, Inc. is an urban Indian			
Administering the Program:	organization.			
Implementing Agency:	Native American Community Health Center, Inc.			
Target Population:	The targeted at-risk community is defined as members of AI/AN tribes living throughout the Phoenix metropolitan area (a non-tribal geographic area).			
Target and Actual Numbers Served:	The program will serve 48 to 60 families in the first 2 years of implementation. The program currently has a caseload of 50 families in the process of fiscal year 4.			

HOME VISITING MODEL SELECTED

NACHCI selected the Parents as Teachers (PAT) home visiting model.

KEY MODEL ADAPTATIONS OR ENHANCEMENTS

NACHCI proposes to implement an enhanced family engagement strategy during the group connections activities. This strategy will include discussions led by a traditional specialist. Discussion topics will include traditional concepts of families and methods of raising children. NACHCI has established a Community Advisory Board to collaborate, guide, and advise the program in the adaptation of cultural components of the group connection intervention and the overall implementation of the program.



DESCRIPTION OF EARLY CHILDHOOD SYSTEM

NACHCI has been providing an array of health care and social services to the Phoenix metropolitan area since 1978. Initially, the agency was funded by a small grant from Indian Health Service to provide community nursing. The agency has grown to include two clinic sites and three divisions: (1) primary medical and dental services, (2) behavioral health services, and (3) the Women Infant and Children (WIC) Nutrition Supplemental Program (SNAP).

NACHCI offers a Health Start program and a prenatal and pediatric program. The grantee identifies internal partnerships between home visiting and WIC, Health Start, TANF, and the Arizona Health Care Cost Containment System Medicaid enrollment, prenatal and family planning, the primary medical clinic, parenting groups, and the domestic violence program. The external system includes Arizona's Department of Health Services' Office of Children's Health; the Early Childhood Development and Health Board, known as First Things First; the State's Early Childhood and Head Start Programs; the State's Home Visiting Task Force; and local Tribes.

EVALUATION APPROACH

Evaluation Question

Do families that receive the enhanced family engagement strategy (discussions at group connections, facilitated by a traditional specialist, covering traditional families and methods of raising children) stay in the program longer than families who do not receive the enhanced family engagement strategy?

Evaluation Design

The evaluation will be a comparison group design intended to compare retention rates of families during their first year of enrollment. Families enrolled during year 1 will be compared to families enrolled in years 2 and 3.

KEY FEDERAL AND TECHNICAL ASSISTANCE (TA) STAFF:

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